

ATTORNEY DOCKET NUMBER  
066303.0109

PATENT  
09/579,640

RECEIPT  
PATENT #3  
79,640  
CFR

1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Ronald D. Lutz, Jr.

Serial No.:

09/579,640

Filing Date:

May 26, 2000

**Title:**

# SYSTEM AND METHOD FOR HOUSING TELECOMMUNICATIONS EQUIPMENT



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Name J. Vasquez  
Date Oct 16, 2000

Dear Sir:

# REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT

Attached is a copy of the Official Filing Receipt received from the U.S. Patent and Trademark Office in the above-identified patent application for which issuance of a corrected filing receipt is respectfully requested.

The Official Filing Receipt contains incorrect Continuing Data. No Continuing Data was claimed by Applicant. Please delete the following information from the Official Filing Receipt: "THIS APPLICATION IS A CON OF 09/248,704 02/11/1999." A corrected filing receipt is respectfully requested.

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PATENT  
09/579,640

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While it is believed that this is not an error by the Applicants, the Commissioner is hereby authorized to charge any amount required by this paper or credit any overpayment to Deposit Account No. 02-0384 of Baker Botts L.L.P.

Respectfully submitted this 17<sup>th</sup> day of October, 2000.

BAKER BOTTS L.L.P.

Attorneys for Applicant



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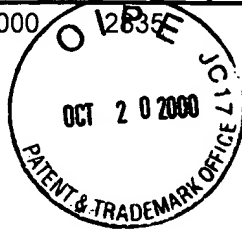


## UNITED STATES PATENT AND TRADEMARK OFFICE

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WASHINGTON, D.C. 20231  
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/579,640	05/26/2000	026355	429	066303.0109	2	25	4

BAKER BOTTS LLP  
2001 ROSS AVENUE  
DALLAS, TX 75201-2980



## FILING RECEIPT



\*OC000000005438083\*

Date Mailed: 09/29/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

RONALD D. LUTZ JR., ROUND ROCK (WILLIAMSON), TX ;

## Continuing Data as Claimed by Applicant

~~THIS APPLICATION IS A CONT OF 09/248,704 DTD 02/11/1999~~

## Foreign Applications

If Required, Foreign Filing License Granted 07/26/2000

\*\* SMALL ENTITY \*\*

## Title

SYSTEM AND METHOD FOR HOUSING TELECOMMUNICATIONS EQUIPMENT

## Preliminary Class

361

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Data entry by : HOPKINS, AUDREY

Team : OIPE

Date: 09/29/2000



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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/579,640	<b>FILING DATE</b> 05/26/2000 <b>RULE</b> _	<b>CLASS</b> 361	<b>GROUP ART UNIT</b> 2835	<b>ATTORNEY DOCKET NO.</b> 066303.0109
<b>APPLICANTS</b> RONALD D. LUTZ JR., ROUND ROCK (WILLIAMSON), TX ; <i>none</i>				
<b>** CONTINUING DATA *****</b> <i>none</i>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 07/26/2000</b>				
<b>Foreign Priority claimed</b> <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <b>35 USC 119 (a-d) conditions met</b> <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <b>Verified and Acknowledged</b> Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 25
				<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> BAKER BOTTS LLP 2001 ROSS AVENUE DALLAS , TX 75201-2980				
<b>TITLE</b> SYSTEM AND METHOD FOR HOUSING TELECOMMUNICATIONS EQUIPMENT				
<b>FILING FEE RECEIVED</b> 429	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input checked="" type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	